Application or	Docket	Number
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PATENT APPLICATION FEE DETERMINATION RECORD
Effective October 1, 2000

09 757726

CLAIMS AS FILED - PART (Column 1)		(Column 2)		SMALL ENTITY TYPE		OR	OTHER THAN SMALL ENTITY				
TOTAL CLAIMS						RATE	FEE		RATE	FEE	
FOR		NUMBER FILED		NUMBER EXTRA		BASIC FEE	355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			23 mir	ninus 20= * ´			X\$ 9=		OR	X\$18=	SH
INDEPENDENT CLAIMS 3 minu			nus 3 =	*		X40=		OR	X80=		
MULTIPLE DEPENDENT CLAIM PRESENT			123		+135=		OR	+270=			
* If the difference in column 1 is less than zero, enter			r "0" in c	olumn 2	TOTAL		OR	TOTAL	764		
CLAIMS AS AMENDED - PAR			TII			- 1 - 1 - 1 - 1	•	OTHER			
		(Column 1)		(Colu	THE RESERVE AND ADDRESS OF THE PERSON.	(Column 3)	SMALL	ENTITY	OR • •	SMALL	
MENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDM	Total	•	Minus	**		=	X\$ 9=		ΟR	X\$18=	
AMEND	Independent	NITATION OF M	Minus	***	T CL AIRA	=	X40=		OR	X80=	
	rinoi Phese	NTATION OF MI	JUITE DE	CINUEN	CLAIM		+135=		OR	+270=	
			•				TOTAL	,	OR	TOTAL	
		(Column 1)		(Colu	mn 2)	(Column 3)	ADDIT. FEE		J	ADDIT. FEE	
		(Column 1) CLAIMS			HEST	(Column 3)		ADDI-			ADDI-
ENT B		REMAINING - AFTER AMENDMENT		PREVI	IBER OUSLY FOR	PRESENT EXTRA	RATE	TIONAL FEE		RATE	TIONAL FEE
AMENDMENT	Total	*	Minus	**	, 	=	X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***	T CL AIRA	=	X40=		OR	X80=	
_	FIRST PRESE	NTATION OF MI	ULTIPLE DE	PENDEN	LCLAIM		+135=		OR	+270=	
	_		··				TOTAL		ł	TOTAL	
							ADDIT. FEE		OR	ADDIT. FEE	
		(Column 1)	100		mn 2)	(Column 3)	<u> </u>		_		
ENT C		CLAIMS REMAINING AFTER AMENDMENT		NUN PREV	HEST MBER IOUSLY DFOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	*	Minus	**		=	X\$ 9=		OR	X\$18=	
ME	Independent	ŀ	Minus	***		=	X40=		OR	X80=	
	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDEN	IT CLAIM				 		-
	If the entry in colu	ımn 1 is lose than t	the entry in col	umn 2 wri	te "O" in co	nlumn 3	+135=		OR	+270=	
**	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										
	The "Highest Nur	mber Previously Pa	aid For" (Total	or Indepen	dent) is th	e highest numbei	r found in the ap	propriate bo	x in c	olumn 1.	